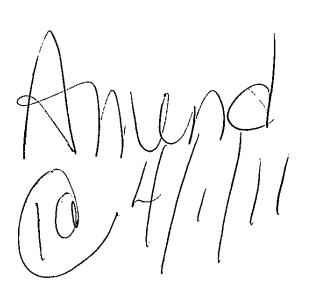
(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	,	
		·

Office Use Only



700196742697

03/21/11--01001--026 **185.00



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	Duncan & Nelson, Inc.					
DOCUMENT NUMBER:	#P99000110701					
The enclosed Articles of Amenda	ent and fee are submitted for filing.					
Please return all correspondence of	Please return all correspondence concerning this matter to the following:					
_						
P	atricia Lawrence					
	Name of Contact Person					
Du	ncan/&::Ne4son, Inc.					
	Firm/ Company					
290	SW 12th Avenue					
	Address					
Dee	cfield Beach, FL 33442					
	City/ State and Zip Code					
bverpr	op78@hotmail.com					
E-mail add	ress: (to be used for future annual report notification)					
For further information concerning	g this matter, please call:					
Patricia Lawren	ce at (954) 425 - 0295					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the follow	ng amount made payable to the Florida Department of State:					
. S \$35 Filing Fee ☐ \$43.75 Fili Certificate		sed)				
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations					
P.O. Box 6327	Clifton Building	•				
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301					



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 22, 2011

PATRICIA LAWRENCE DUNCAN & NELSON, INC. 290 SW 12TH AVENUE DEERFIELD BEACH, FL 33442

SUBJECT: DUNCAN & NELSON, INC.

Ref. Number: P99000110701

We have received your document for DUNCAN & NELSON, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE AMENDMENT IS MISSING THE LAST PAGE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 411A00006948

THECENED

11 AFR -1 AM 8: 32

SECRETARY OF STATE
ALLARYSSEE, FLORID

Articles of Amendment to

Articles of Incorporation of

Duncan & Nelson, Ir	1C. P. P. P. P.
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
#P9900011070	
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	, Florida Statutes, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of	the corporation:
	The new
abbreviation "Corp.," "Inc.," or Co.," or the	he word "corporation," "company," or "incorporated" or the designation "Corp," "Inc," or "Co". A professional corporation fessional association," or the abbreviation "P.A."
B. Enter new principal office address, if appl	icable:
(Principal office address MUST BE A STREET	<u>('ADDRESS</u> ')
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFIC	
D. If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address in Florida, enter the name of the stered office address:
Name of New Registered Agent:	Joseph Sabga (Already listed as PresidentDirector
New Registered Office Address:	290 SW 12th Avenue (Florida street address)
_	Deerfield Beach ,Florida 33442
	(City) (Zip Code)
New Registered Agent's Signature, if changin	ng Registered Agent:
I hereby accept the appointment as registered as	gent. Lan familiar with and accept the obligations of the position.
Si	ignature of New Registered Agent, if changing
	\bigwedge \

Page 1 of 3

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

. (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
D	Peter Sabga	290 SW 12th Ave. Deerfield Beach FL 33442	
		· · · · · · · · · · · · · · · · · · ·	
	ding or adding additional Articles, endeditional sheets, if necessary). (Be s		
<u>provisi</u>	mendment provides for an exchange tons for implementing the amendment applicable, indicate N/A)		
		·	

The date of each amendment(s	s) adoption:
	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
((voting group)
action was not required. The amendment(s) was/were	e adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
action was not required.	
Dated3 Signature	3/11/2011
(By a selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Joseph Sabga
	(Typed or printed name of person signing)
	President Director
	(Title of person signing)